

## APPLICATION FOR BUILDING PERMIT

Revised 3/29/2006

## MACOMB TOWNSHIP

## BUILDING AND ZONING DEPARTMENT

**Bob Beckett C.B.O.**  
Building Official  
Zoning Administrator



54111 Broughton Road  
Macomb, MI 48042  
Office Phone: 992-0710

\*PLANS ARE APPROVED SUBJECT TO COMPLIANCE WITH MACOMB TOWNSHIP ORDINANCES WHETHER MARKED OR NOT.

**NOTE: ALL REQUIRED PERMITS MUST ACCOMPANY THIS SUBMISSION. APPLICATION FEES ARE NON-REFUNDABLE.**

Date \_\_\_\_\_

Project Address \_\_\_\_\_

Subdivision \_\_\_\_\_ Lot(s) \_\_\_\_\_ Zoning \_\_\_\_\_

Type of Project \_\_\_\_\_ Sq. Ft. \_\_\_\_\_

Proposed Use \_\_\_\_\_ Est. Cost \_\_\_\_\_

Owner \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Arch. Engineer \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Contractor/Applicant \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Fed. Employer I.D.# \_\_\_\_\_ Wkrs. Comp. Ins. Carrier \_\_\_\_\_  
(or reason for exemption) (or reason for exemption)

M.E.S.C. Employer # \_\_\_\_\_ Bldr. Lic. # \_\_\_\_\_ Exp. Date \_\_\_\_\_  
(or reason for exemption)

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent, and we agree to conform to all applicable laws of the State of Michigan and ordinances of Macomb Township. All information provided on this application is accurate to the best of my knowledge.

**"Section 23a of the State Construction Code Act of 1972, 1972 PA 230, MCL 125.1523A, prohibits a person from conspiring to circumvent the licensing requirements of this state relating to persons who are to perform work on a residential building or a residential structure. Violators of Section 23a are subject civil fines."**

Applicant Signature \_\_\_\_\_ Dr. Lic.# \_\_\_\_\_

**\*\*\*\*Do not write below this line\*\*\*\***

I/C 1<sup>st</sup> \_\_\_\_\_ sq. ft. \_\_\_\_\_ sq. ft.

R Township Plan Code \_\_\_\_\_

Living Area: 1st \_\_\_\_\_ 3rd \_\_\_\_\_  
2nd \_\_\_\_\_ 4th \_\_\_\_\_

Total Sq. Ft. \_\_\_\_\_

Garage \_\_\_\_\_ Base. \_\_\_\_\_ Crawl \_\_\_\_\_

Master \_\_\_\_\_ Slab \_\_\_\_\_

APPLICATION NO: \_\_\_\_\_

COMMENTS: \_\_\_\_\_

Bldg. Dir.: \_\_\_\_\_

Before permit is issued approval must be obtained from the following:

Road Commission \_\_\_\_\_

Health Dept. \_\_\_\_\_

Soil Erosion \_\_\_\_\_

Construction Permit \_\_\_\_\_

Assessor \_\_\_\_\_

Engineer \_\_\_\_\_

Planning Commission \_\_\_\_\_

D.P.W.S- \_\_\_\_\_ Wtr. W- \_\_\_\_\_

Valuation \_\_\_\_\_

Permit Fee \_\_\_\_\_

Approach \_\_\_\_\_

Plan Review \_\_\_\_\_

Total Fees \_\_\_\_\_

Minus Application Fee \_\_\_\_\_

Total Due \_\_\_\_\_